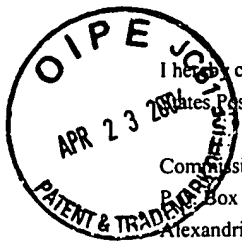


TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/668,253
		Filing Date	October 16, 2003
		First Named Inventor	Mosesov, Oleg
		Art Unit	3762
		Examiner Name	To Be Assigned
Total Number of Pages in This Submission	6	Attorney Docket Number	021628-000700US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i> Return Postcard, PTO/SB/08A, 08B, 1 reference copy
Remarks		The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual	Townsend and Townsend and Crew LLP Chun-Pok Leung Reg. No. 41,405	
Signature		
Date	April 21, 2004	

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
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Signature		Date	April 21, 2004



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PATENT
Attorney Docket No.: 021628-000700US

On

4/21/04

TOWNSEND and TOWNSEND and CREW LLP

By:

James Yang

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

OLEG MOSESOV

Application No.: 10/668,253

Filed: October 16, 2003

For: WIRELESS COMMUNICATION
WITH IMPLANTABLE MEDICAL
DEVICE

Examiner: To Be Assigned

Art Unit: 3762

INFORMATION DISCLOSURE
STATEMENT UNDER 37 CFR §1.97 and
§1.98

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

The references cited on attached form PTO/SB/08A and PTO/SB/08B are being called to the attention of the Examiner. Copies of the reference Nos. 1-15 are not enclosed. A copy of Reference No. 16 is enclosed herewith. It is respectfully requested that the cited references be expressly considered during the prosecution of this application, and the references be made of record therein and appear among the "references cited" on any patent to issue therefrom.

As provided for by 37 CFR 1.97(g) and (h), no inference should be made that the information and references cited are prior art merely because they are in this statement and no

representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information.

Applicant believes that no fee is required for submission of this statement.

However, if a fee is required, the Commissioner is authorized to deduct such fee from the undersigned's Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,



Chun-Pok Leung
Reg. No. 41,405

TOWNSEND and TOWNSEND and CREW LLP
Two Embarcadero Center, Eighth Floor
San Francisco, California 94111-3834
Tel: 650-326-2400
Fax: 650-326-2422
RL:je
60174100 v1



INFORMATION DISCLOSURE STATEMENT BY APPLICANT (use as many sheets as necessary)			Complete if Known		
			Application Number	10/668,253	
			Filing Date	October 16, 2003	
			First Named Inventor	Oleg Mosesov	
			Art Unit	3762	
			Examiner Name	To Be Assigned	
Sheet	1	of	2	Attorney Docket Number	021628-000700US

U.S. PATENT DOCUMENTS+					
Examiner Initials*	Cite No. ¹	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number Kind Code ² (if known)			
	0001	US-2002/0042637 A1	04-11-2002	Stover	
	0002	US-2002/0045920 A1	04-18-2002	Thompson	
	0003	US-2002/0065539 A1	05-30-2002	Von Arx et al.	
	0004	US-2002/0095195 A1	07-18-2002	Mass et al.	
	0005	US-2002/0103514 A1	08-01-2002	Abrahamson	
	0006	US-2002/0123776 A1	09-05-2002	Von Arx et al.	
	0007	US-5,487,760	01-30-1996	Villafana	
	0008	US-5,861,019	01-19-1999	Sun et al.	
	0009	US-6,115,636	09-05-2000	Ryan	
	0010	US-6,150,951	11-21-2000	Olejniczak	
	0011	US-6,167,312	12-26-2000	Goedeke	
	0012	US-6,169,925 B1	01-02-2001	Villaseca et al.	
	0013	US-6,240,317 B1	05-29-2001	Villaseca et al.	
	0014	US-6,379,300 B1	04-30-2002	Haubrich	
	0015	US-6,535,766 B1	03-18-2003	Thompson et al.	

FOREIGN PATENT DOCUMENTS								
Examiner Initials*	Cite No. ¹	Foreign Patent Document			Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ⁶
		Country Code ³	Number ⁴	Kind Code ⁵ (if known)				
								<input type="checkbox"/>
								<input type="checkbox"/>
								<input type="checkbox"/>

Examiner Signature		Date Considered	
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. ¹ Applicant's unique citation designation number (optional). ² Kind Codes of U.S. Patent Documents at www.uspto.gov or MPEP 901.04. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. ⁶ Applicant is to place a check mark here if English language Translation is attached.

Substitute for form 1449B/PTO				Complete if Known	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT (use as many sheets as necessary)				Application Number	10/668,253
				Filing Date	October 16, 2003
				First Named Inventor	Oleg Mosesov
				Art Unit	3762
				Examiner Name	To Be Assigned
Sheet	2	of	2	Attorney Docket Number	021628-000700US

NON PATENT LITERATURE DOCUMENTS			
Examiner Initials *	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
	0016	Memorandum Opinion and Order, In the matter of Biotronik, Inc. Equipment Authorization for the Medical Implant Communications Service, FCC Identifier PG6BA0T, Adopted February 12, 2003, Released February 25, 2003, Before the Federal Communications Commission, Washington D.C. 20554	

Examiner Signature		Date Considered	
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¹ EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

² Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.